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Fiscal Note

Drafting Number: LLS 22-0583 **Date:** January 27, 2022 Prime Sponsors: Bill Status: Senate SVMA Sen. Sonnenberg

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| Bill Topic: | HEALTH FACILITY VISITATION DURING PANDEMIC | | |
|---------------------------|--|---|--|
| Summary of Fiscal Impact: | ☐ State Revenue☑ State Expenditure☐ State Transfer | ☐ TABOR Refund ☐ Local Government ☐ Statutory Public Entity | |
| | | sing care facilities and assisted living residences to allow have at least one visitor of their choosing. The bill will an ongoing basis. | |
| Appropriation Summary: | For FY 2022-23, the bill requires an appropriation of \$45,409 to the Department of Public Health and Environment. | | |
| Fiscal Note Status: | The fiscal note reflects the introduced bill. | | |

Table 1 **State Fiscal Impacts Under SB 22-053**

| | | Budget Year FY 2022-23 | Out Year FY 2023-24 |
|----------------------|------------------------|---------------------------|------------------------|
| Revenue | | - | - |
| Expenditures | General Fund | \$45,409 | \$42,699 |
| | Centrally Appropriated | \$11,377 | \$11,691 |
| | Total Expenditures | \$56,786 | \$54,390 |
| | Total FTE | 0.6 FTE | 0.6 FTE |
| Transfers | | - | - |
| Other Budget Impacts | General Fund Reserve | \$6,811 | \$6,405 |

Summary of Legislation

The bill requires health care facilities, including hospitals, nursing care facilities and assisted living residences, to allow their patients and residents to have at least one visitor of their choosing. The bill also requires these health care facilities to have written policies and procedures concerning visitation, including any restrictions or limitations that are placed on visitation and the reasons for these restrictions or limitations.

The bill prohibits health care facilities from disallowing visitation if the sole reason is to reduce the risk of transmission of a pandemic disease, but allows health care facilities to impose requirements and limitations on visitors to reduce the risk of transmission of a pandemic disease as follows:

- during a period of heightened pandemic disease transmission risk, health care facilities may
 designate entry points, deny visitors with known symptoms of the pandemic disease, require
 visitors to wear face coverings or other protective equipment, and require them to sign a waiver
 acknowledging the risks of visitation;
- during a period of known community transmission of a pandemic disease, health care facilities
 may require all visitors to be screened for symptoms of the disease before visitation, and deny
 entrance to any visitor who has symptoms of the disease; and
- during widespread community transmission of the disease, facilities may limit visitation to
 essential caregivers or for compassionate care visits from a friend or family member to alleviate
 physical or emotional distress.

Background

The Department of Public Health and Environment (CDPHE) licenses and regulates approximately 3,620 health care facilities. CDPHE, as a normal course of business, prioritizes and investigates complaints made against health care facilities.

Assumptions

This fiscal note assumes that most health care facilities will comply with requirements of the bill, but that there will be complaints filed against health care facilities that do not comply with these requirements. It is assumed that 1.5 percent of complaints will be related to this issue, equating to approximately 54 complaints being filed annually against health care facilities starting in FY 2022-23.

State Expenditures

The bill increases state expenditures in the CDPHE by \$56,786 in FY 2022-23 and \$54,390 in FY 2023-24, paid from the General Fund. Expenditures are shown in Table 2 and detailed below.

Table 2 Expenditures Under SB 22-053

| Cost Components | FY 2022-23 | FY 2023-24 |
|---|------------|------------|
| Department of Public Health and Environment | | _ |
| Personal Services | \$38,399 | \$41,889 |
| Operating Expenses | \$810 | \$810 |
| Capital Outlay Costs | \$6,200 | - |
| Centrally Appropriated Costs ¹ | \$11,377 | \$11,691 |
| FTE – Personal Services | 0.6 FTE | 0.6 FTE |
| Total | \$56,786 | \$54,390 |
| Total FTE | 0.6 FTE | 0.6 FTE |

¹ Centrally appropriated costs are not included in the bill's appropriation.

Department of Public Health and Environment. Beginning in FY 2022-23, CDPHE will require 0.6 FTE to review, investigate and resolve visitation complaints filed against health care facilities as a result of this bill. Costs are adjusted for the General Fund paydate shift in the first year. Costs are assumed to be paid from the General Fund given the low available fund balance in the General Licensure Fund, which is typically used to pay for the regulation of health facilities.

Department of Human Services. This bill may result in minimal policy changes or adjustments to practice in facilities operated by the Department of Human Services. The fiscal note assumes that this increased workload can be accomplished within existing resources and no change in appropriations is required.

Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. These costs, which include employee insurance and supplemental employee retirement payments, are shown in Table 2.

Other Budget Impacts

General Fund reserve. Under current law, an amount equal to 15 percent of General Fund appropriations must be set aside in the General Fund statutory reserve beginning in FY 2022-23. Based on this fiscal note, the bill is expected to increase the amount of General Fund held in reserve by \$6,811 in FY 2022-23 and \$6,405 in FY 2023-24, which will decrease the amount of General Fund available for other purposes.

Effective Date

The bill takes effect upon signature of the Governor, or upon becoming law without his signature.

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State Appropriations

For FY 2022-23, the bill requires a General Fund appropriation of \$45,409 to the Department of Public Health and Environment and 0.6 FTE.

State and Local Government Contacts

Health Care Policy and Financing Information Technology

Human Services Public Health and Environment